

For Official Use Only

EName _____

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

7.a. Nature of Interest, Transaction, or Income.

No Activity

7.b. Amount.

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed

On

Date _____

Telephone Number

Name of Person Filing

Donald Brown

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Welfare Fund Bricklayers Local #1Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 2000 Market St.City St. LouisState MissouriZIP Code + 4 63103

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Welfare Fund BricklayersTrade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4

11.a. Nature of such dealing.

Annual December Luncheon Mtg.

11.b. Approximate dollar value of such dealing.

54.48

12.a. Nature of interest held or income received.

12.b. Amount.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Commerce BankTrade Name, if any: P.O. Box, Bldg., Room No., if any Street 8000 Forsyth Blvd.City ClaytonState MissouriZIP Code + 4 63105

14.a. Nature of payment.

3-17-04	Luncheon Mtg.	57.71
4-3-04	2 Concert Tickets	120.00
7-9-04	Golf + Lunch	101.00
10-26-04	Luncheon Mtg	32.00
11-23-04	Holiday Ham Certificate	50.00
11-24-04	Charity Boxing Benefit	93.56
12-13-04	Luncheon Mtg	37.50

14.b. Amount of payment.

491.7713.b. Is the Business an Employer ☒or Consultant ☐

?

Name of Person Filing

Donald Brown

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Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

9. Business deals with:

- ☐ a. Labor Organization
- ☐ b. Trust
- ☐ c. Employer

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Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

12.b. Amount.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Grabel, Schnieders, Hollman & Co.

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 206 W. Argonne Ste. 200

City Kirkwood

State Missouri ZIP Code + 4 63122

14.a. Nature of payment.

2 Tickets to Grouse Auction
Dated - 3-20-04

13.b. Is the Business an Employer ☒or Consultant ☐

?

14.b. Amount of payment.

45.00

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Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

9. Business deals with:

☐

a. Labor Organization

☐

b. Trust

☐

c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

12.b. Amount.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

14.a. Nature of payment.

7-13-04 Golf-Luncheon

14.b. Amount of payment.

13.b. Is the Business an Employer

☒

or Consultant

☐

?

142.85

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Street

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- ☐ b. Trust
- ☐ c. Employer

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Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

12.b. Amount.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Missouri Valley Partners

Trade Name, if any:

P.O. Box, Bldg., Room No., if any P.O. Box 16901

Street 135 N. Mercersburg Ave. Ste. 500

City Clayton

State Missouri ZIP Code + 4 63105

14.a. Nature of payment.

10-08-04 Golf + Luncheon

13.b. Is the Business an Employer ☒or Consultant ☐

?

14.b. Amount of payment.

59.00

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- ☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

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11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

12.b. Amount.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name ING Investment Management

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 10 State House Sq. 5th Fl.

City Hartford

State CT ZIP Code + 4 06103

14.a. Nature of payment.

7-25-04 Golf + Lunch13.b. Is the Business an Employer ☒or Consultant ☐ ?

14.b. Amount of payment.

84.38